

### **REGISTERED NURSING EDUCATION PROGRAM**

### **Request for Application**

### **CAPITATION**

California Healthcare Workforce Policy Commission 1600 9<sup>th</sup> Street, Room 440 Sacramento, California 95814 (916) 653-0733

October 2006

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### **SCHEDULE AND DEADLINES**

October 02, 2006 Release of Request for Application (RFA).

Post RFA on the California Healthcare Workforce Policy

Commission (Commission) web site at:

http://www.oshpd.ca.gov/Boards/HWPC/index.htm

November 27, 2006 APPLICATION DUE. Completed application must be received at

the Commission office by 5:00 p.m. on due date. (Due date

postmarks will not be accepted.)

**Nov 27, 2006 – Jan 5, 2007** Review of applications

**February 7-8, 2007 Commission meeting:** Presentations by nursing programs;

award of funds

**February 16, 2007** Send notices to awardees and non-eligible applicants. Post and

announce final Song-Brown Registered Nursing Education

Program <u>awards</u> on the Commission web site.

http://www.oshpd.ca.gov/oshpdSERVICES/PressRel.htm

Feb 19 – Mar 31, 2007 Write contracts

**April – May 2007** Send contract agreements to nursing programs for signatures,

and forward to business and contract services unit.

**July 1, 2007 – June 30, 2009** Contracts effective

### **AUTHORITY:**

Pursuant to the Song-Brown Family Physician Training Act, Health & Safety Code Sections 128200, et. seq., (Attachment A) the California Healthcare Workforce Policy Commission (Commission) will be accepting applications from programs that educate registered nurses (RNs) and which meet the Standards and Guidelines promulgated by the Commission (Attachment B-E).

### **FUNDING:**

### **FUNDING TYPE:**

### **CAPITATION**

Capitation funding is to support the costs (including faculty, support services, etc.) associated with training a full-time RN student. Capitation cycles are funded for a two-year cycle at a capitation rate based on the type of program as follows:

<u>ADN Programs</u> - \$10,000 per student per year, up to ten students, for a maximum of two years (\$200,000).

BSN Programs - \$12,000 per student per year, up to ten students, for a maximum of two years (\$240,000).

MSN Programs - \$12,000 per student per year, up to ten students, for a maximum of two years (\$240,000).

Programs awarded capitation cycles will enter into a contract with the Office of Statewide Health Planning and Development (OSHPD) for the fiscal period beginning on July 1, 2007 and ending on June 30, 2009. Payments will be made on a quarterly basis (every three months) upon receipt of a certification form from the program which includes documentation identifying the number of nursing students enrolled throughout the quarter.

The Song-Brown Act requires that registered nurse training programs approved for funding shall, as a minimum, maintain a level of expenditures equivalent to that expended during the 2004-05 fiscal year. For new training programs not in existence in the 2004-05 fiscal year, the maintenance of effort will be based on the level of expenditures equivalent to that expended during the academic year in which the program first applied for and subsequently received funds from Song-Brown. Funds awarded shall be used to develop new programs or to expand existing programs, and shall not replace funds supporting the level of training program expenditures stated above.

### **CRITERIA:**

Section 128230 of the Song-Brown Act requires that:

- "...the commission shall give priority to programs that have demonstrated success in the following areas:
  - (a) Actual placement of individuals in medically underserved areas.
  - (b) Success in attracting and admitting members of minority groups to the program.
  - (c) Success in attracting and admitting individuals who were former residents of medically underserved areas.
  - (d) Location of the program in a medically underserved area.
  - (e) The degree to which the program has agreed to accept individuals with an obligation to repay loans awarded pursuant to the Health Professions Education Fund."

### **ELIGIBILITY:**

All accredited California Schools of Nursing located within California are eligible to apply for Capitation funding. All nursing education programs applying for Song Brown funds must meet the Standards and Guidelines adopted by the Commission (Attachments B-E). Programs may apply for funding of projects beginning no earlier than July 1, 2007 and ending no later than June 30, 2009. Programs may be funded for two years.

### **SELECTION CRITERIA:**

Applications received will be evaluated based on the programs demonstration in the application and presentations to the Commission that they have met the Standards and Guidelines for funding adopted by the Commission. (Attachments B -E)

### **AWARDS:**

Recommendations for the award of contracts will be made by the Commission to the Director of OSHPD. Such recommendations will be made after review of the responses to this request for applications at a public meeting of the Commission scheduled for February 7-8, 2007. Awarded programs will be required to submit biannual progress reports and a final report complete with data outcomes on the Capitation at the end of the funding period.

### **QUESTIONS:**

Questions regarding the Request for Application (RFA) and the review process may be submitted to OSHPD by contacting:

Manuela Lachica at (916) 654-1311, via e-mail at: <a href="mailto:mlachica@oshpd.ca.gov">mlachica@oshpd.ca.gov</a> or by FAX at (916) 654-3138.

### **APPLICATION INFORMATION:**

The applicant is to submit one completed checklist and one signed original application package with (17) copies, for a total of eighteen (18) complete applications. Copies must be:

- Double sided (back to back)
- Stapled or binder clipped together, do not use rubber bands, paperclips or folders

Submit packages to:

Office of Statewide Health Planning and Development Healthcare Workforce and Community Development Division 1600 9<sup>th</sup> Street, Room 440 Sacramento, CA 95814

Attn: Manuela Lachica

#### **DEADLINE:**

The complete application package must be received at the above address by 5:00 p.m. on Monday, November 27, 2006. No extensions of the due date and/or time will be granted.

We encourage programs to submit their application packages in advance of the final deadline. If you would like to receive confirmation that we have received your application and that it is complete, please contact Erin Brown at (916) 653-0283 <a href="mailto:ebrown@oshpd.state.ca.us">ebrown@oshpd.state.ca.us</a> or Michael Zamora (916) 657-2607 <a href="mailto:mzamora@oshpd.state.ca.us">mzamora@oshpd.state.ca.us</a>.

PLEASE NOTE: Acceptance of application packages will <u>NOT</u> be based on postmarks. It is the applicant's responsibility to ensure that the application package is received by the deadline.

### **INVITATION:**

The Commission invites the Program Director, or other authorized representative of the program to be present at its meeting on February 7-8, 2007, to provide a 7 to 10-minute summary of the proposed application as outlined in the Commission's Operating Guidelines (Attachment E) and answer any questions the Commission might have. Applicants are strongly encouraged to attend the Commission meeting and remain until funding decisions are made in order to be available to answer questions regarding the program and/or application which may arise subsequent to the presentation by the program. The applicant institution's representative should be prepared to amend the request if the Commission suggests that such an amendment would enhance the application's chances. Presentations will be heard by the Commission in the order that applications are received by OSHPD.

### **INSTRUCTIONS:**

All applicants are to use the application with a revision date of 9/06/06 using any other version of the application will disqualify the applicant from this funding cycle. This application is available by email in Microsoft Word format. Please submit your requests for electronic format to Michael Zamora (916) 657-2607 <a href="mailto:mzamora@oshpd.state.ca.us">mzamora@oshpd.state.ca.us</a> or Erin Brown (916) 653-0283 <a href="mailto:ebrown@oshpd.state.ca.us">ebrown@oshpd.state.ca.us</a>

- 1. The application must be:
  - Typewritten, word-processed, or laser-printed
  - Single-spaced
  - No less than 12 point font
  - Numbered at the bottom of the page
- 2. All applicants must complete the Application Face Sheet and Sections I through IX inclusive. Incomplete applications will not be accepted.
- 3. All questions included in the application must be addressed. If a question is not applicable to your program, answer "N/A". If a question is left blank, the application will be considered incomplete and deemed ineligible.
- 4. If any acronyms or abbreviations are used, please include an acronym and definition page.
- 5. Unless otherwise directed within the application, use continuation pages (a maximum of three pages per item) if additional space is needed to complete any item. Identify each item with its title and attach it to the appropriate page of the application. Please number these continuation pages using the following: Page 2, Page 2a, Page 2b, etc.

The following are specific instruction related to each section of the application, failure to provide information as instructed could result in the application being disqualified.

### Checklist

All applicants must complete the enclosed checklist and submit with the applications.

### **Application Face Sheet**

- Program Director is the individual who is to direct the proposed program and who will be
  responsible for the program. The Program Director will be required each quarter to certify any
  expenditures pertaining to the contract. The Program Director is required to sign all quarterly
  certifications.
- Contract Organization is the institution which will be legally and financially responsible and accountable for all State funds awarded on the basis of this application. The contract is written with this organization. Please provide the name of the current Contracts Officer, phone number, and address where the contract should be mailed.
- Sign Application Face Sheet in blue ink.
- Any changes of Program Director or Contract Organization during the application period must be made known to OSHPD, attention Manuela Lachica, by formal letter as soon as possible.

### **Section I – Program History/Executive Summary**

- Complete all questions, indicate N/A if the question does not pertain to the applicant program.
- When providing the answers, re-state the question and provide the answer beneath.

### **Section II – Budget/Budget Proposal Summary**

- Complete all questions, indicate N/A if the question does not pertain to the applicant program.
- Round amounts to the nearest whole dollar.
- If the 2005/06 revenues do not equal expenditures, provide explanation.

### Section III – Accreditation/Approval

• Attach copies of the most recent accreditation or approval letter from the appropriate accrediting agency/board. You must include all correspondence in regard to cited deficiencies.

### Section IV - Education in California Areas of Unmet Need

- Complete all questions, indicate N/A if the question does not pertain to the applicant program.
- When providing the answers, re-state the question and provide the answer beneath.
- When completing the table for training sites in areas of unmet need, provide a complete physical address (street, city, county and zip code) for each training site where at least three or more students spend a portion of their clinical training.
- Do not use P.O. Boxes

### Section V – Program Graduates

- For each graduate provide the current practice site. The site provided must be their current practice site, not their original placement site. If current practice site is unknown, indicate N/A.
- Complete Grid #1

### Section VI – Education of Underrepresented Minorities

- Complete Grid #2
- For all trainees listed as other, specify the race/ethnicity at the bottom of the page and describe the relevance to the population being served.

### Section VII – Organization and Faculty

- Complete all questions.
- Faculty information must be presented on the forms provided.

### Section VIII - Evaluation

Complete Grid #3

### Section IX - Program Changes/Letters of Support

- Provide any significant changes in your program since the last application.
- Provide letters of support from community organizations (e.g. clinics) associated with your program.

### SONG-BROWN FAMILY PHYSICIAN TRAINING ACT REGISTERED NURSING EDUCATION PROGRAM

**CAPITATION APPLICATION** 

### CHECKLIST

Please use the following checklist to ensure your application includes all required items. Include checklist in submission of RFA.

Face Sheet
All information completed
Proper contract organization provided
Appropriate signatures obtained
Section I (Program History/Executive Summary)
☐ All questions answered in the proper format (see pg. v for instructions) or marked N/A
☐ Brief overview of proposal provided
Section II (Summary of Expenditures/Revenues )
All tables completed or marked N/A
Section III (Accreditation/Approval)
Copy of the most recent accreditation or approval letter(s) from the appropriate accrediting
agency/board
Section IV (Education in California Areas of Unmet Need)
All questions answered in the proper format (see pg. v for instructions)
Complete addresses provided for training sites
Section V (Program Graduates)
Provided program graduate data for 2004 and 2005 graduating classes
Provided complete addresses for graduates current practice site
Grid #1 completed
Section VI (Education of Underrepresented Minorities)
Grid #2 completed (Race/Ethnicity of the RN Program Graduates)
Total trainees for each year equals the total # of "URM's" plus "others" reported
For trainees reported as "other", specified race/ethnicity and describe relevance to population served
Section VII (Organization and Faculty)
All questions answered in proper format (see page vi for instructions)
Section VIII (Evaluation)
Grid #3 completed
☐ Brief summary of results and activities to address deficiencies provided
Section IX (Program Changes/Letters of Support)
☐ Summary of significant changes to program provided
☐ Provided letters of support from community based organizations associated with your program
Note: The application packet must be complete when submitted. Incomplete applications will be
deemed ineligible.
<del></del>
Program Director Date

### SONG-BROWN FAMILY PHYSICIAN TRAINING ACT REGISTERED NURSING EDUCATION PROGRAM

**CAPITATION APPLICATION** 

For Commission Use Only:	
Application I.D. No.	

### **FACE SHEET**

(To Be Completed by Applicant Agency)

Name of Education Institution	on			
Program Director Name	Degree	S		Title of Position
Mailing Address (Organ	ization, Street, City,	State, Zip	Code)	Telephone No.
E-Mail Address	FAX Nu	ımber	Federal Tax	ID Number
Funds Applying for:	# of Students* x	Rate	x 2 years =	Total Requested
Capitation - ADN Capitation - BSN Capitation - MSN	X X	\$10,000 \$12,000 \$12,000	x 2 x 2 x 2	\$ \$ \$
*max # of student is 1  Grand Total Requested		orogram		\$
Contract Organization (Nam	ne)		Address (Stre	eet, City, State, Zip Code)
Chief Administrative Officer			Name and T	itle of Contracts Officer
Telephone Number (Area Contracts Officer  CERTIFICATION AND ACC		SIGNATUR We, the	undersigned, cei	n original application in <u>blue</u> in tify that the statements hereil
Program Director		are true	and complete to Administrativ	the best of our knowledge: ve Authority
Date:			Date	

### **SECTION I - Program History/Executive Summary**

<u>Histo</u>	ry:					
			s were in training in the	e last three		
ac	auemi	years (ÅY)? <u>Male</u>	<u>Female</u>	<u>Total</u>		
	AY 200	4/05				
	AY 200	4/05				
	AY 200	5/06				
PI	ease a	nswer the followi	ng questions in the	space provided:		
1.		our AY 2004/05, hong education progr		enrollment positions were offer	ered within your	
2.	For yo	our AY 2004/05, ho in any increase or	ow many students <u>gra</u> decrease.	duated the nursing education	orogram?	
3.	For you	our AY 2005/06, hoation program?	ow many total students	s were offered <u>admission</u> to yo	our nursing	
4.	For yo	our AY 2005/06, ho in any increase or	ow many students <u>gra</u> decrease.	duated the nursing education	orogram?	
5.	5. How many students are fluent enough in a second language to conduct a non-English patient history or exam? (Provide a listing of languages spoken.)					
6.	How	do you define cultu	ral competency/cultur	ally responsive care?		
	a)	How do you incorcurriculum?	porate cultural compe	tency/culturally responsive ca	re into your	
	b)	How does it bene	fit or relate to your pa	tient population?		
<u>Exec</u>	utive S	<u>summary:</u>				
			application (no more to the substitution application (no more to the substitution application) application (no more to the substitution) application (no mor	han two pages) containing a ta.	orief overview of	

### **SECTION II – Summary of Expenditures/Revenues**

EXPENDITURES (2004-05 Fiscal Year)				
Faculty Costs Student Stipends Costs of Nursing Education Center All other Costs				
TOTAL				
EXPENDITURES (2005-06 Fiscal Ye	<u></u>			
Faculty Costs Student Stipends Costs of Nursing Education Center All other Costs  TOTAL				
REVENUES (2005-06 Fiscal Year)	1			
Federal Funding Research Grants Private Grants or Legacies Institutional support (parent institution) Nursing Education Center State of California (Family Practice Training Act) Other				
TOTAL:				

[If the 2005-06 total costs do not equal total revenues, please explain.]

### **SECTION III – Accreditation/Approval**

Attach copies of the most recent BRN approval and, if applicable, accreditation or approval letter from the appropriate accrediting agency/board. You must include any correspondence in regard to cited deficiencies.

### **SECTION IV – Education in California Areas of Unmet Need**

Please provide answers to each of the following questions:

- Explain the program strategies to increase the annual number of program enrollments and RN graduates utilizing the capitation funding requested.
- 2. Explain the program strategies developed to identify, recruit and admit students who possess characteristics that would suggest a predisposition to practice in California areas of unmet need and express commitment to serve in those areas.
- 3. Describe the counseling and placement program you use to encourage graduates to practice in California areas of unmet need, if applicable.
- 4. What components of the training program prepare graduates for the care of underserved populations? How many trainees participate in each training component and include the length of time spent in each.

5.	Does the program have a required number of h site? Yes or No	nours that mus	t be spent in an underserved clinical	
	a. If so, what is the required <u>number</u> of these hours?	b.	If so, what <u>percent</u> of the total number of clinical hours must be spent in underserved sites?	
	Associate Degree Nurse (ADN) Bachelor of Science of Nursing (BSN)-initial license Bachelor of Science of Nursing (BSN)-post license Master of Science of Nursing (MSN)-entry level Master of Science of Nursing (MSN)-post license			

### **SECTION IV – Education in California Areas of Unmet Need**

Provide a complete address for each of your nursing education program's clinical sites where at least **three** or more students spend a portion of their clinical training. Sites are to be listed only once. List only those sites that qualify based on the information provided on page 9-10.

You may locate a census the OSHPD ID for a California licensed hospital or community clinic using the following web site: <a href="http://www.oshpd.ca.gov/HQAD/Hospital/hosplist.htm">http://www.oshpd.ca.gov/HQAD/Hospital/hosplist.htm</a> and <a href="http://www.oshpd.ca.gov/HQAD/clinics/clinlist.htm">http://www.oshpd.ca.gov/HQAD/clinics/clinlist.htm</a>

Name of Site:	Address (Street, city, state & zip code) DO NOT USE P.O. BOXES	OSHPD ID #

### **SECTION V – Program Graduates**

List graduates of the training program for the 2005 and 2006 graduating classes, including the following information (one line per graduate). List graduates in order of year of graduation.

You may locate the OSHPD ID for a California licenses hospital or community clinic using the following websites: <a href="http://www.oshpd.ca.gov/HQAD/Hospital/hospital.htm">http://www.oshpd.ca.gov/HQAD/Hospital/hospital.htm</a> and <a href="http://www.oshpd.ca.gov/HQAD/clinics/clinlist.htm">http://www.oshpd.ca.gov/HQAD/clinics/clinlist.htm</a>.

2004-05 Graduate Year	Graduate Name	Name of Current Practice Site Street, City, & Zip Code -DO NOT USE P.O. BOXES-	OSHPD ID

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### **SECTION V – Grid #1**

Record the number of graduates practicing in California underserved practice locations. **Do not** include out-of-State locations except where specifically requested (summary row labeled "c" at bottom). Each graduate should only be counted once and the total number of graduates should equal those listed on page 8.

Underserved Designations	2004-05	2005-06	Total
	Graduates	Graduates	
Area Designations:			
California Primary Care Shortage Areas <sup>1</sup>			
Health Professional Shortage Areas (HPSA) (Section 332)			
Medically Undeserved Area/Populations (MUA/MUP)			
Site Designations:			
California Licensed Community Clinics (CC)			
California Licensed Free Clinics (FC)			
City/County Facilities (CNTY)			
BPHC Community Health Centers (CHC) (Section 330)			
Critical Access Hospitals			
Correctional Facilities			
Disproportionate Share Hospitals			
Federally Qualified Health Centers and Look-Alikes (FQHC and FQHC-LA) (Section 1905 (a) and (1) of the Social Security Act)			
Health Care for the Homeless (HO) (Section 340)			
Migrant Health Center (MHC) (Section 329)			
National Health Service Corps (NHSC) (Section 330)			
Public Housing Primary Care (PHPC) (Section 340)			
Public Hospitals (County & City)			
Certified Rural Health Clinic (RHC) (Section 1861 (aa) (2) of Social Security Act) (Public Law 95-210)			
State Hospitals			
Teaching Hospitals			

### SONG-BROWN FAMILY PHYSICIAN TRAINING ACT REGISTERED NURSING EDUCATION PROGRAM

### **CAPITATION APPLICATION**

### SECTION V - Grid # 1 (Cont.)

Indian Health Services Tribally-Run Program (TRHP) (Public Law 93-638 and 94-437)	
Urban Indian Health Center (UIHC) (Public Law 93-638 and 94-437)	
Veterans Hospitals	
SUMMARY OF GRADUATES:	
a) Total # of Grads in Above Areas in California	
b) Total # of Grads in California, but <u>no</u> t <u>in</u> Above Areas	
c) Total # of Grads <u>in</u> Class (Include California, out-of -State and missing graduates)	
% of Graduates in Undeserved Areas <u>in</u> California (a divided by c)	

<sup>&</sup>lt;sup>1</sup>California Primary Care Shortage Areas will be provided by e-mail. Please contact Michael Zamora of the Song-Brown Program at (916) 657-2607 or by e-mail at <a href="mailto:mzamora@oshpd.ca.gov">mzamora@oshpd.ca.gov</a>.

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### **SECTION V – Program Graduates (Continued)**

If you feel you have graduate	s practicing in unde	erserved areas no	t captured on the	e previous table
(page 10), please explain.				

### <u>SECTION VI – Education of Underrepresented Minorities</u>

List underrepresented minorities enrolled in your registered nursing education program on page 13. Please use definitions listed below.

## CALIFORNIA HEALTHCARE WORKFORCE POLICY COMMISSION'S DEFINITION OF UNDERREPRESENTED MINORITY

<u>Underrepresented Minority</u> refers to racial and ethnic populations that are underrepresented in the health professions relative to their numbers in the total population under consideration. In most instances this will include African-Americans, Hispanics or Latinos, American Indians, Alaskan natives, Native Hawaiians or other Pacific Islanders, and Asians **other than Chinese, Filipinos, Japanese, Korean, Malaysians, Pakistanis, Asian Indian, or Thai**.

<u>American Indian or Alaska Native</u> means a person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community.

Asian means a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, **for example**, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

<u>Black or African American</u> means a person having origins in any of the black racial groups of Africa.

<u>Hispanics or Latino</u> means a person of Cuban, Mexican, Puerto Rican, and Central or South American origin, regardless of race.

<u>Native Hawaiian or Other Pacific Islander</u> means a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

Section VI - Grid #2

### RACE/ETHNICITY OF THE REGISTERED NURSE EDUCATION PROGRAM GRADUATES

В C D Ε F Α Pacific Total American Black <sup>1</sup>Asian <sup>2</sup>Other **Trainees** Category Indian American Latino Islander Graduates in 2004-05 Graduates in 2005-06 Total

**Total Trainees** = lines A-F

<sup>&</sup>lt;sup>1</sup>Asian (other than Chinese, Filipino, Japanese, Korean, Malaysians, Pakistanis, Asian Indian or Thai)

 $<sup>^2</sup>$ Other (All other trainees not indicated in lines A – E). Please specify Race/Ethnicity and describe relevance to the population being served.

### **SECTION VII – Organization and Faculty**

Please provide answers to each of the following questions:

1.	Describe the resources available to the education program,	including	faculty
	supporting staff, and facilities.		

2.	Provide biographical sketches for full-time nursing faculty at the institution
	Use the form provided on the next page.

### **SECTION VII – Organization and Faculty**

whether or not salary is reque	ested. Begin with the P	n for each key professional staff m rogram Director. Do not include any ducation Program. Use additional p	y faculty or
Name (Last, First, Initial)		Academic Title Program Title	
Relationship to Proposed Pro program?	gram: What percentag	e of professional time is to be devo	ted to the
Education (Begin with bacca	laureate training, inclu	de postdoctoral)	
Institution Discipline	Degree	Year Conferred	
Honors/Teaching Awards			
Relevant Major Research, Proto Song Brown	ofessional Interest, Sch	nolarly Activity or Community Servi	ce related
List Recent Relevant Publicat	ions		
Professional and/or Research experience to program).	Experience (Start with	n present position and list recent sig	gnificant

### SONG-BROWN FAMILY PHYSICIAN TRAINING ACT REGISTERED NURSING EDUCATION PROGRAM

**CAPITATION APPLICATION** 

### **SECTION VIII – Evaluation – Grid #3**

Data for the Most Recent Graduating Class of Nursing Education Program

	Total Students Enrolled <sup>1</sup>	Students Withdrawn or Dropped <sup>1</sup>					Students Decelerating <sup>1</sup>					Part-time		Students			
Year of Graduating Class		Students	Minorit	y <sup>4</sup>	Non- mino		То	tal	Mino	ority <sup>4</sup>	Non- mino		Total		Stude	nts'	Lang Rela
			#	%	#	%	#	%	#	%	#	%	#	%	#	%	#
Total																	

Year		Students Graduating <sup>1</sup>						Graduates		Graduates		es Practicing	
(cont'd)	Minority <sup>4</sup>		Non-minority		Total		Resp	onding <sup>2</sup>	Practicing in California <sup>2</sup>		in California with Underserved Populations <sup>2,3</sup>		Continued on
	#	%	#	%	#	%	#	%	#	%	#	%	next page
Total													

All percentages for student columns should be shown as percents of students enrolled in the graduating class for that year (one class only)

<sup>&</sup>lt;sup>2</sup>All percentages for graduate columns should be shown as percents of total graduates for the year

<sup>&</sup>lt;sup>3</sup>Practices which serve > 50% MediCal and/or medically indigent uninsured patients

<sup>&</sup>lt;sup>4</sup>Commission Definition of Underrepresented Minority

### **SECTION VIII – Evaluation**

Year		Graduates Passing NCLEX Certifying Exam <sup>2</sup>										
(cont'd)		Graduates esponding	M	linority <sup>4</sup>	No	on-minority	Total					
	# %		#	%	#	%	#	%				
Total												

<sup>&</sup>lt;sup>1</sup>All percentages for student columns should be shown as percents of students enrolled in the graduating class for that year (one class only)

<sup>&</sup>lt;sup>2</sup>All percentages for graduate columns should be shown as percents of total graduates for the year

<sup>&</sup>lt;sup>3</sup>Practices which serve > 50% MediCal and/or medically indigent uninsured patients

<sup>&</sup>lt;sup>4</sup>Commission Definition of Underrepresented Minority

### **SECTION IX – Program Changes/Letters of Support**

1)	If there have been any significant changes in your program since the la	ast
	application, please explain.	

2) Provide letters of support from community organizations (e.g. clinics)

Attachment A Page 1 of 8

#### HEALTH AND SAFETY CODE SECTION 128200-128241

128200. (a) This article shall be known and may be cited as the Song-Brown Family Physician Training Act.

(b) The Legislature hereby finds and declares that physicians engaged in family practice are in very short supply in California. The current emphasis placed on specialization in medical education has resulted in a shortage of physicians trained to provide comprehensive primary health care to families. The Legislature hereby declares that it regards the furtherance of a greater supply of competent family physicians to be a public purpose of great importance and further declares the establishment of the program pursuant to this article to be a desirable, necessary and economical method of increasing the number of family physicians to provide needed medical services to the people of California. The Legislature further declares that it is to the benefit of the state to assist in increasing the number of competent family physicians graduated by colleges and universities of this state to provide primary health care services to families within the state.

The Legislature finds that the shortage of family physicians can be improved by the placing of a higher priority by public and private medical schools, hospitals, and other health care delivery systems in this state, on the recruitment and improved training of medical students and residents to meet the need for family physicians. To help accomplish this goal, each medical school in California is encouraged to organize a strong family practice program or department. It is the intent of the Legislature that the programs or departments be headed by a physician who possesses specialty certification in the field of family practice, and has broad clinical experience in the field of family practice.

The Legislature further finds that encouraging the training of primary care physician's assistants and primary care nurse practitioners will assist in making primary health care services more

accessible to the citizenry, and will, in conjunction with the training of family physicians, lead to an improved health care delivery system in California.

Community hospitals in general and rural community hospitals in particular, as well as other health care delivery systems, are encouraged to develop family practice residencies in affiliation or association with accredited medical schools, to help meet the need for family physicians in geographical areas of the state with recognized family primary health care needs. Utilization of expanded resources beyond university-based teaching hospitals should be emphasized, including facilities in rural areas wherever possible.

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The Legislature also finds and declares that nurses are in very short supply in California. The Legislature hereby declares that it regards the furtherance of a greater supply of nurses to be a public purpose of great importance and further declares the expansion of the program pursuant to this article to include nurses to be a desirable, necessary, and economical method of increasing the number of nurses to provide needed nursing services to the people of California.

It is the intent of the Legislature to provide for a program designed primarily to increase the number of students and residents receiving quality education and training in the specialty of family practice and as primary care physician's assistants, primary care nurse practitioners, and registered nurses and to maximize the delivery of primary care family physician services to specific areas of California where there is a recognized unmet priority need. This program is intended to be implemented through contracts with accredited medical schools, programs that train primary care physician's assistants, programs that train primary care nurse practitioners, programs that train registered nurses, hospitals, and other health care delivery systems based on per-student or per-resident capitation formulas. It is further intended by the Legislature that the programs will be professionally and administratively accountable so that the maximum cost-effectiveness will be achieved in meeting the professional training standards and criteria set forth in this article and Article 2 (commencing with Section 128250).

128205. As used in this article, and Article 2 (commencing with Section 128250), the following terms mean:

- (a) "Family physician" means a primary care physician who is prepared to and renders continued comprehensive and preventative health care services to families and who has received specialized training in an approved family practice residency for three years after graduation from an accredited medical school.
- (b) "Associated" and "affiliated" mean that relationship that exists by virtue of a formal written agreement between a hospital or other health care delivery system and an approved medical school which pertains to the family practice training program for which state contract funds are sought. This definition shall include agreements that may be entered into subsequent to October 2, 1973, as well as those relevant agreements that are in existence prior to October 2, 1973.
  - (c) "Commission" means the California Healthcare Workforce Policy Commission.
- (d) "Programs that train primary care physician's assistants" means a program that has been approved for the training of primary care physician assistants pursuant to Section 3513 of the Business and Professions Code.
- (e) "Programs that train primary care nurse practitioners" means a program that is operated by a California school of medicine or nursing, or that is authorized by the Regents of the University of California or by the Trustees of the California State University, or that is approved by the Board of Registered Nursing.

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- (f) "Programs that train registered nurses" means a program that is operated by a California school of nursing and approved by the Board of Registered Nursing, or that is authorized by the Regents of the University of California, the Trustees of the California State University, or the Board of Governors of the California Community Colleges, and that is approved by the Board of Registered Nursing.
- 128207. Any reference in any code to the Health Manpower Policy Commission is deemed a reference to the California Healthcare Workforce Policy Commission.
- 128210. There is hereby created a state medical contract program with accredited medical schools, programs that train primary care physician's assistants, programs that train primary care nurse practitioners, programs that train registered nurses, hospitals, and other health care delivery systems to increase the number of students and residents receiving quality education and training in the specialty of family practice or in nursing and to maximize the delivery of primary care family physician services to specific areas of California where there is a recognized unmet priority need for those services.
- 128215. There is hereby created a California Healthcare Workforce Policy Commission. The commission shall be composed of 15 members who shall serve at the pleasure of their appointing authorities:
  - (a) Nine members appointed by the Governor, as follows:
- (1) One representative of the University of California medical schools, from a nominee or nominees submitted by the University of California.
- (2) One representative of the private medical or osteopathic schools accredited in California from individuals nominated by each of these schools.
  - (3) One representative of practicing family physicians.
- (4) One representative who is a practicing osteopathic physician or surgeon and who is board certified in either general or family practice.
- (5) One representative of undergraduate medical students in a family practice program or residence in family practice training.
- (6) One representative of trainees in a primary care physician's assistant program or a practicing physician's assistant.
- (7) One representative of trainees in a primary care nurse practitioners program or a practicing nurse practitioner.
- (8) One representative of the Office of Statewide Health Planning and Development, from nominees submitted by the office director.

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- (9) One representative of practicing registered nurses.
- (b) Two consumer representatives of the public who are not elected or appointed public officials, one appointed by the Speaker of the Assembly and one appointed by the Chairperson of the Senate Committee on Rules.
- (c) Two representatives of practicing registered nurses, one appointed by the Speaker of the Assembly and one appointed by the Chairperson of the Senate Committee on Rules.
- (d) Two representatives of students in a registered nurse training program, one appointed by the Speaker of the Assembly and one appointed by the Chairperson of the Senate Committee on Rules.
- (e) The Chief of the Health Professions Development Program in the Office of Statewide Health Planning and Development, or the chief's designee, shall serve as executive secretary for the commission.
- 128220. The members of the commission, other than state employees, shall receive compensation of twenty-five dollars (\$25) for each day's attendance at a commission meeting, in addition to actual and necessary travel expenses incurred in the course of attendance at a commission meeting.
- 128224. The commission shall identify specific areas of the state where unmet priority needs for dentists, physicians, and registered nurses exist.
- 128225. The commission shall do all of the following:
- (a) Identify specific areas of the state where unmet priority needs for primary care family physicians and registered nurses exist.
- (b) Establish standards for family practice training programs and family practice residency programs, postgraduate osteopathic medical programs in family practice, and primary care physician assistants programs and programs that train primary care nurse practitioners, including appropriate provisions to encourage family physicians, osteopathic family physicians, primary care physician's assistants, and primary care nurse practitioners who receive training in accordance with this article and Article 2 (commencing with Section 128250) to provide needed services in areas of unmet need within the state. Standards for family practice residency programs shall provide that all the residency programs contracted for pursuant to this article and Article 2 (commencing with Section 128250) shall both meet the Residency Review Committee on Family Practice's "Essentials" for Residency Training in Family Practice and be approved by the Residency Review Committee on Family Practice. Standards for postgraduate osteopathic medical programs in family practice, as approved by the American Osteopathic Association Committee on Postdoctoral Training for interns and residents, shall be established to meet the requirements of this subdivision in order to ensure that those programs are comparable to the other programs specified in this subdivision. Every program shall

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include a component of training designed for medically underserved multicultural communities, lower socioeconomic neighborhoods, or rural communities, and shall be organized to prepare program graduates for service in those neighborhoods and communities. Medical schools receiving funds under this article and Article 2 (commencing with Section 128250) shall have programs or departments that recognize family practice as a major independent specialty. Existence of a written agreement of affiliation or association between a hospital and an accredited medical school shall be regarded by the commission as a favorable factor in considering recommendations to the director for allocation of funds appropriated to the state medical contract program established under this article and Article 2 (commencing with Section 128250).

For purposes of this subdivision, "family practice" includes the general practice of medicine by osteopathic physicians.

- (c) Establish standards for registered nurse training programs. The commission may accept those standards established by the Board of Registered Nursing.
- (d) Review and make recommendations to the Director of the Office of Statewide Health Planning and Development concerning the funding of family practice programs or departments and family practice residencies and programs for the training of primary care physician assistants and primary care nurse practitioners that are submitted to the Health Professions Development Program for participation in the contract program established by this article and Article 2 (commencing with Section 128250). If the commission determines that a program proposal that has been approved for funding or that is the recipient of funds under this article and Article 2 (commencing with Section 128250) does not meet the standards established by the commission, it shall submit to the Director of the Office of Statewide Health Planning and Development and the Legislature a report detailing its objections. The commission may request the Office of Statewide Health Planning and Development to make advance allocations for program development costs from amounts appropriated for the purposes of this article and Article 2 (commencing with Section 128250).
- (e) Review and make recommendations to the Director of the Office of Statewide Health Planning and Development concerning the funding of registered nurse training programs that are submitted to the Health Professions Development Program for participation in the contract program established by this article. If the commission determines that a program proposal that has been approved for funding or that is the recipient of funds under this article does not meet the standards established by the commission, it shall submit to the Director of the Office of Statewide Health Planning and Development and the Legislature a report detailing its objections. The commission may request the Office of Statewide Health Planning and Development to make advance allocations for program development costs from amounts appropriated for the purposes of this article.

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- (f) Establish contract criteria and single per-student and per-resident capitation formulas that shall determine the amounts to be transferred to institutions receiving contracts for the training of family practice students and residents and primary care physician's assistants and primary care nurse practitioners and registered nurses pursuant to this article and Article 2 (commencing with Section 128250), except as otherwise provided in subdivision (d). Institutions applying for or in receipt of contracts pursuant to this article and Article 2 (commencing with Section 128250) may appeal to the director for waiver of these single capitation formulas. The director may grant the waiver in exceptional cases upon a clear showing by the institution that a waiver is essential to the institution's ability to provide a program of a quality comparable to those provided by institutions that have not received waivers, taking into account the public interest in program cost-effectiveness. Recipients of funds appropriated by this article and Article 2 (commencing with Section 128250) shall, as a minimum, maintain the level of expenditure for family practice or primary care physician's assistant or family care nurse practitioner training that was provided by the recipients during the 1973-74 fiscal year. Recipients of funds appropriated for registered nurse training pursuant to this article shall, as a minimum, maintain the level of expenditure for registered nurse training that was provided by recipients during the 2004-05 fiscal year. Funds appropriated under this article and Article 2 (commencing with Section 128250) shall be used to develop new programs or to expand existing programs, and shall not replace funds supporting current family practice or registered nurse training programs. Institutions applying for or in receipt of contracts pursuant to this article and Article 2 (commencing with Section 128250) may appeal to the director for waiver of this maintenance of effort provision. The director may grant the waiver if he or she determines that there is reasonable and proper cause to grant the waiver.
- (g) Review and make recommendations to the Director of the Office of Statewide Health Planning and Development concerning the funding of special programs that may be funded on other than a capitation rate basis. These special programs may include the development and funding of the training of primary health care teams of family practice residents or family physicians and primary care physician assistants or primary care nurse practitioners or registered nurses, undergraduate medical education programs in family practice, and programs that link training programs and medically underserved communities in California that appear likely to result in the location and retention of training program graduates in those communities. These special programs also may include the development phase of new family practice residency, primary care physician assistant programs, primary care nurse practitioner programs, or registered nurse programs.

The commission shall establish standards and contract criteria for special programs recommended under this subdivision.

(h) Review and evaluate these programs regarding compliance with this article and Article 2 (commencing with Section 128250). One standard for evaluation shall be the number of recipients who, after completing the program, actually go on to

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serve in areas of unmet priority for primary care family physicians in California or registered nurses who go on to serve in areas of unmet priority for registered nurses.

- (i) Review and make recommendations to the Director of the Office of Statewide Health Planning and Development on the awarding of funds for the purpose of making loan assumption payments for medical students who contractually agree to enter a primary care specialty and practice primary care medicine for a minimum of three consecutive years following completion of a primary care residency training program pursuant to Article 2 (commencing with Section 128250).
- 128230. When making recommendations to the Director of the Office of Statewide Health Planning and Development concerning the funding of family practice programs or departments, family practice residencies, and programs for the training of primary care physician assistants, primary care nurse practitioners, or registered nurses, the commission shall give priority to programs that have demonstrated success in the following areas:
  - (a) Actual placement of individuals in medically underserved areas.
- (b) Success in attracting and admitting members of minority groups to the program.
- (c) Success in attracting and admitting individuals who were former residents of medically underserved areas.
  - (d) Location of the program in a medically underserved area.
- (e) The degree to which the program has agreed to accept individuals with an obligation to repay loans awarded pursuant to the Health Professions Education Fund.
- 128235. Pursuant to this article and Article 2 (commencing with Section 128250), the Director of the Office of Statewide Health Planning and Development shall do all of the following:
- (a) Determine whether family practice, primary care physician assistant training program proposals, primary care nurse practitioner training program proposals, and registered nurse training program proposals submitted to the California Healthcare Workforce Policy Commission for participation in the state medical contract program established by this article and Article 2 (commencing with Section 128250) meet the standards established by the commission.
- (b) Select and contract on behalf of the state with accredited medical schools, programs that train primary care physician assistants, programs that train primary care nurse practitioners, hospitals, and other health care delivery systems for the purpose of training undergraduate medical students and residents in the specialty of family practice. Contracts shall be awarded to those institutions that best demonstrate the ability to provide quality education and training and to retain students and residents in specific areas of California where there is a recognized unmet priority need for primary care family physicians. Contracts shall be based

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upon the recommendations of the commission and in conformity with the contract criteria and program standards established by the commission.

- (c) Select and contract on behalf of the state with programs that train registered nurses. Contracts shall be awarded to those institutions that best demonstrate the ability to provide quality education and training and to retain students and residents in specific areas of California where there is a recognized unmet priority need for registered nurses. Contracts shall be based upon the recommendations of the commission and in conformity with the contract criteria and program standards established by the commission.
- (d) Terminate, upon 30 days' written notice, the contract of any institution whose program does not meet the standards established by the commission or that otherwise does not maintain proper compliance with this part, except as otherwise provided in contracts entered into by the director pursuant to this article and Article 2 (commencing with Section 128250).
- 128240. The Director of the Office of Statewide Health Planning and Development shall adopt, amend, or repeal regulations as necessary to enforce this article and Article 2 (commencing with Section 128250), which shall include criteria that training programs must meet in order to qualify for waivers of single capitation formulas or maintenance of effort requirements authorized by Section 128250. Regulations for the administration of this chapter shall be adopted, amended, or repealed as provided in Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code.
- 128240.1. The department shall adopt emergency regulations, as necessary to implement the changes made to this article by the act that added this section during the first year of the 2005-06 Regular Session, no later than September 30, 2005, unless notification of a delay is made to the Chair of the Joint Legislative Budget Committee prior to that date. The adoption of regulations implementing the applicable provisions of this act shall be deemed to be an emergency and necessary for the immediate preservation of the public peace, health, safety, or general welfare. The emergency regulations authorized by this section shall be submitted to the Office of Administrative Law for filing with the Secretary of State and shall remain in effect for no more than 180 days, by which time the final regulations shall be developed.

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# SONG-BROWN FAMILY PHYSICIAN TRAINING ACT STANDARDS FOR REGISTERED NURSING EDUCATION PROGRAMS PURSUANT TO HEALTH AND SAFETY CODE, SECTIONS 128200, et. ADOPTED BY THE CALIFORNIA HEALTHCARE WORKFORCE POLICY COMMISSION

(Adopted April 21, 2006)

- I. Each Registered Nursing Education Program approved for funding under the Song-Brown Family Physician Training Act (hereinafter "the Act") shall be operated by an accredited California School of Nursing or shall be approved by the Regents of the University of California or by the Trustees of the California State University and Colleges, or the Board of Governors of the California Community Colleges, and shall be approved by the Board of Registered Nursing pursuant to Section 2834-2837, Article 8, Chapter 6, Div. 2, of the Business and Professions Code.
- II. Each Registered Nursing Education Program approved for funding under the Act shall include a component of clinical experience and curriculum in medically underserved multi-cultural communities, lower socioeconomic neighborhoods, or rural communities, and shall be organized to prepare nurses for service in such neighborhoods or communities.
- III. Appropriate strategies shall be developed by each nursing education institution receiving funds under the Act to encourage nursing students who are educated in programs funded by the Act to enter into practice in underserved areas for nurses within California as defined by the Healthcare Workforce Policy Commission (hereinafter referred to as "areas of need"). Such strategies shall incorporate the following elements:
  - A. An established procedure to identify, recruit, and admit nursing students who possess characteristics which would suggest a predisposition to practice in areas of need, and who express a commitment to serve in areas of need.
  - B. An established counseling and placement program designed to encourage nursing program graduates to enter practice in underserved areas.
  - C. A program component such as a preceptorship experience in an underserved area, which will enhance the potential of nursing program graduates to practice in such an area.

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# CALIFORNIA HEALTHCARE WORKFORCE POLICY COMMISSION REGISTERED NURSING EDUCATION PROGRAMS GUIDELINES FOR FUNDING APPLICANTS AND FOR PROGRAM EVALUATION (Revised September 13, 2006)

### **Definition of Nurse**

A nurse is a registered nurse who successfully completes a program approved as meeting standards established by the Board of Registered Nursing as specified in the California Nursing Practice Act. The practice of nursing as defined by Section 2725 of the California Nursing Practice Act means those functions, including basic health care, that help people cope with difficulties in daily living that are associated with their actual or potential health or illness problems or the treatment thereof, and that require a substantial amount of scientific knowledge or technical skill, including all of the following:

- (1) Direct and indirect patient care services that ensure the safety, comfort, personal hygiene, and protection of patients; and the performance of disease prevention and restorative measures.
- (2) Direct and indirect patient care services, including, but not limited to, the administration of medications and therapeutic agents, necessary to implement a treatment, disease prevention, or rehabilitative regimen ordered by and within the scope of licensure of a physician, dentist, podiatrist, or clinical psychologist, as defined by Section 1316.5 of the Health and Safety Code.
- (3) The performance of skin tests, immunization techniques, and the withdrawal of human blood from veins and arteries.
- (4) Observation of signs and symptoms of illness, reactions to treatment, general behavior, or general physical condition, and (A) determination of whether the signs, symptoms, reactions, behavior, or general appearance exhibit abnormal characteristics, and (B) implementation, based on observed abnormalities, of appropriate reporting, or referral, or standardized procedures, or changes in treatment regimen in accordance with standardized procedures, or the initiation of emergency procedures.

Graduates of registered nursing programs are required to take the National Council Licensure Examination (NCLEX). The NCLEX is designed to test knowledge, skills and abilities essential to the safe and effective practice of nursing at the entry level. The results of the NCLEX examination are used by the California Board of

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Registered nursing to make decisions about licensure. The California Board of Registered Nursing is the only entity in California that can release examination results to licensure candidates.

### **Program Approval**

The education programs shall be required to have, at minimum, approval from the California Board of Registered Nursing. Section 2786 of the Business & Professions Codes states:

- (a) An approved school of nursing is one which has been approved by the board, gives the course of instruction approved by the board, covering not less than two academic years, is affiliated or conducted in connection with one or more hospitals, and is an institution of higher education or is affiliated with an institution of higher education. For purposes of this section, "institution of higher education" includes community colleges offering an associate degree. An approved school of nursing which is not an institution of higher education shall make an agreement with an institution of higher education in the same general location to grant an associate of arts degree to individuals who graduate from the school of nursing or to grant a baccalaureate degree in nursing with successful completion of an additional course of study as approved by the board and the institution involved.
- (b) The board shall determine by regulation the required subjects of instruction to be completed in an approved school of nursing for licensure as a registered nurse and shall include the minimum units of theory and clinical experience necessary to achieve essential clinical competency at the entry level of the registered nurse. The board's standards shall be designed to encourage all schools to provide clinical instruction in all phases of the educational process.
- (c) The board shall perform or cause to be performed an analysis of the practice of the registered nurse no less than every five years. Results of the analysis shall be utilized to assist in the determination of the required subjects of instruction, validation of the licensing examination, and assessment of the current practice of nursing.

In addition to the requirements set forth in section 2786 of the Business and Professions code, programs should be encouraged to seek and maintain additional national program accreditation through the professional organizations accrediting nursing education programs.

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### **Strategies Relating to Underserved Areas**

Special consideration by the California Healthcare Workforce Policy Commission is given to those nursing education programs which have developed coherent strategies for locating their graduates in California's underserved areas for registered nurses as defined by the Commission; which developed close ties with communities and neighborhoods which are experiencing a shortage of nursing care; which have success in attracting and admitting members of underrepresented minority groups to the program; and which have the best records in placing/encouraging graduates to practice in underserved areas.

### **Clinical Components**

All education programs should include clinical practice supervised by the faculty. There should be a preceptorship designed to prepare nurses for practice in underserved areas as defined by the California Healthcare Workforce Policy Commission. For the purposes of this education, a preceptorship is an experience supervised by a designated preceptor (registered nurse or physician) who has responsibility for teaching, supervising, and evaluating the trainee and providing an environment which permits observation, active participation and collaboration in the delivery of nursing care.

Pursuant to Title 16, California Code of Regulations, Section 1427:

- (a) A nursing program shall not utilize agencies and/or community facilities for clinical experience without prior approval by the board. Each program must submit evidence that it has complied with the requirements of subdivisions (b) and (c) of this section and the policies outlined by the board.
  - (b) A program which utilizes agencies and/or community facilities for clinical experience shall maintain written objectives for student learning in such facilities, stated in measurable performance terms, and shall assign students only to facilities which can provide the experience necessary to meet those objectives.
  - (c) Each such program shall maintain written agreements with such facilities and such agreements shall include the following:
  - (1) Assurance of the availability and appropriateness of the learning environment in relation to the program's written objectives;
  - (2) Provision for orientation of faculty and students;
  - (3) A specification of the responsibilities and authority of the facility's staff as related to the program and to the educational experience of the students;
  - (4) Assurance that staff is adequate in number and quality to insure safe and continuous health care services to patients;

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### Curriculum

The curriculum shall be directed toward preparing registered nurses to effectively deliver nursing care.

Title 16, Section 1426, California Code of Regulations details the curriculum of a nursing program as follows:

- (a) A program's curriculum shall not be implemented or revised until it has been approved by the board.
- (b) The curriculum shall reflect a unifying theme, which includes the nursing process as defined by the faculty, and shall be designed so that a nurse who completes the program will have the knowledge and skills necessary to function in accordance with the minimum standards for competency set forth in Section 1443.5.
- (c) The curriculum shall consist of not less than fifty-eight (58) semester units, or eighty-seven (87) quarter units.
- (d) Theory and clinical practice shall be concurrent in the following nursing areas: medical/surgical, maternal/child, mental health, psychiatric nursing and geriatrics. Instruction will be given in, but not limited to, the following: personal hygiene, human sexuality, client abuse, cultural diversity, nutrition (including therapeutic aspects), pharmacology, legal, social and ethical aspects of nursing, nursing leadership and management.
- (e) The following shall be integrated throughout the entire nursing curriculum:
- (1) Nursing process;
- (2) Basic intervention skills in preventive, remedial, supportive and rehabilitative nursing;
- (3) Physical, behavioral and social aspects of human development from birth through all age levels;
- (4) The knowledge and skills required to develop collegial relationships with health care providers from other disciplines;
- (5) Communication skills including principles of verbal, written and group communications;
- (6) Natural sciences including human anatomy, physiology and microbiology; and
- (7) Related behavioral and social sciences with emphasis on societal and cultural patterns, human development, and behavior relevant to health/illness.
- (f) The course of instruction shall be presented in semester or quarter units.

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### **Data Collection and Evaluation**

Each nursing education program should submit a plan for collecting nurse graduate data and should evaluate the program, and graduates to include at least the following:

#### 1. Student Data and Evaluation

Tools shall be selected and/or developed that will provide descriptive information that may include but are not limited to the following:

- a. Number of applications for admission, number of nursing students enrolled.
- b. Data on nursing student population characteristics (e.g., age, sex, race, educational background).
- c. Students attrition and deceleration.
- d. Students fluent in a second language.

#### Graduate Data and Evaluation

Tools shall be selected and/or developed that will provide descriptive information to include the following:

- a. Number and percent of graduates.
- b. Data on nursing graduate characteristics (e.g., age, sex, race, educational background).
- c. Job selection, employment setting, and location following graduation.
- d. Graduates practicing in California, practicing as a registered nurse and practicing with underserved areas/populations.
- e. Data on NCLEX pass rates.

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# SONG-BROWN FAMILY PHYSICIAN TRAINING ACT CONTRACT CRITERIA FOR REGISTERED NURSING EDUCATION PROGRAM CONTRACTS PURSUANT TO HEALTH AND SAFETY CODE, SECTIONS 128200, et. (Revised September 13, 2006)

### I. Contract Awards

- A. Each contract entered into, pursuant to the Song-Brown Family Physician Training Act, Health and Safety Code, Sections 128200, et., (hereinafter "the Act"), shall be based on the recommendation of the Healthcare Workforce Policy Commission to the Director of the Office of Statewide Health Planning and Development recorded in the Healthcare Workforce Policy Commission official minutes.
- B. Each contract shall be for a purpose authorized by the Healthcare Workforce Policy Commission Standards for Registered Nursing Education Programs.
- C. Each contract shall be between the Office of Statewide Health Planning and Development and a Contractor authorized to apply for funds by the Healthcare Workforce Policy Commission Standards for Registered Nursing Education Programs.
- D. Purpose for Which Contract Funds May be Expended
  - Contract funds may be expended for any purpose which the educational
    institution judges will most effectively advance the education of nursing
    students, but may not be expended for any purpose specifically prohibited by
    State law, by these contract criteria, or by the contract with the nursing
    education institution.
  - Contract funds may be used for expenses incurred for the provision of nursing education, including faculty and staff salaries, nursing student stipends, alterations and renovations necessary to the provision of the nursing education programs, and supplies and travel directly related to the nursing education program.
  - 3. Contract funds may be used for new construction only when such construction is specifically provided for in the contract.

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#### E. Maintenance of Effort

Registered nurse training programs approved for funding under the Act, shall, as a minimum, maintain a level of expenditures equivalent to that expended for registered nurse training during the 2004-05 fiscal year. For new training programs not in existence in the 2004-05 fiscal year, the maintenance of effort will be based on the level of expenditures equivalent to that expended during the academic year in which the program first applied for and subsequently received funds from Song-Brown, Funds provided in this contract shall not replace the funds supporting the level of training program expenditures stated above.

### II. Contract Terms

- A. Funds must be expended during such months and in accordance with such provisions as are provided in the contract, which shall be in accordance with recommendations of the California Healthcare Workforce Policy Commission.
- B. Payment shall be made quarterly in arrears on the basis of amounts set forth by the Contractor with final invoice submitted within 120 days of contract's end to the Healthcare Workforce and Community Development Division. The invoice shall include the name of the person employed under this contract, certification by the Program Director that the person was engaged in activities authorized by this agreement, and costs to the Contractor for the services for which reimbursement is sought. The required invoice format shall be provided to the Contractor prior to the effective date of the Contract.
- C. Each Contract shall specify the total amount allowable under the Contract and allowable in each budget category authorized under the Contract, and shall be in accordance with recommendations of the California Healthcare Workforce Policy Commission. Transfer of funds between budget categories is permitted only with express written permission of the Deputy Director of the Healthcare Workforce and Community Development Division, and only when not prohibited by other provisions of these Contract Criteria.

### D. Method of Payment

Payment under the Act shall be at a capitation rate per student for each student enrolled in the education program or up to \$125,000.00 for special programs.

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### III. Accounting Records and Audits

### A. Accounting

Accounting for contract funds will be in accordance with the education institution's accounting practices based on generally accepted accounting principles consistently applied regardless of the source of funds. Supporting records must be in sufficient detail to show the exact amount and nature of expenditures.

Education institutions may elect to commingle capitation funds received under the Act with any other income available for operation of the nursing education program provided that the institution maintains such written fiscal control and accounting procedures as are necessary to assure proper disbursement of, and accounted for, such commingled funds, including provisions for:

- 1. The accurate and timely separate identification of funds received under the Act.
- 2. The separate identification of expenditures prohibited by the contract criteria.
- 3. An adequate record of proceeds from the sale of any equipment purchased by funds received under the Act.

### B. Expenditure Reporting

Reports of nursing education program expenditures and enrollment of nursing students under the contract must be submitted as requested by the Commission or the Director of the Office of Statewide Health Planning and Development for purposes of program administration, evaluation, or review.

### C. Record Retention and Audit

 The education institution shall permit the Director of the Office of Statewide Health Planning and Development, or the Auditor General, or the State Controller, or their authorized representatives, access to records maintained on source of income and expenditures of its nursing education program for the purpose of audit and examination.

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- 2. The education institution shall maintain books, records, documents, and other evidence pertaining to the costs and expenses of this contract (hereinafter collectively called the "records") to the extent and in such detail as will properly reflect all net costs, direct and indirect, of labor, materials, equipment, supplies and services, and other costs and expenses of whatever nature for which reimbursement is claimed under the provisions of this contract.
- 3. The education institution agrees to make available at the office of the education institution at all reasonable times during the period set forth in subparagraph 4 below any of the records for inspection, audit or reproduction by an authorized representative of the State.
- 4. The education institution shall preserve and make available its records (a) for a period of three years from the date of final payment under this contract, and (b) for such longer period, if any, as is required by applicable statute, by any other clause or this subcontract, or by subparagraph a or b below:
  - a. If this contract is completely or partially terminated, the records relating to the work terminated shall be preserved and made available for a period of three years from the date of any resulting final settlement.
  - b. Records which relate to (1) litigation of the settlement of claims arising out of the performance of this contract, or (2) costs and expenses of this contract as to which exception has been taken by the State or any of its duly authorized representatives, shall be retained by the education institution until disposition of such appeals, litigation, claims, or exceptions.
- 5. Except for the records described in subparagraph 4 above, the education institution may in fulfillment of its obligation to retain the records as required by this clause substitute photographs, microphotographs, or other authentic reproductions of such records, after the expiration of the two years following the last day of the month or reimbursement to the education institution of the invoice or voucher to which such records relate, unless a charter person is authorized by the State or its duly authorized representatives.

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# CALIFORNIA HEALTHCARE WORKFORCE POLICY COMMISSION OPERATING GUIDELINES ADOPTED JUNE 10, 1999 (Revised September 13, 2006)

The <sup>1</sup>California Healthcare Workforce Policy Commission (Commission) values the expertise and perspective of applicants and encourages their input. In order to manage the application process in the most effective and efficient manner, the Commission has adopted operating guidelines to provide open communication that is fair and manageable and allows for progress to be made in the limited time available. The Commission hopes that the operating guidelines will allow everyone adequate opportunity for input.

#### **GENERAL COMMUNICATIONS:**

To communicate outside of Commission meetings, information and/or materials should be forwarded to the Program Administrator, who will consult with the Commission Chair as to how best to disseminate the information to Commissioners.

### **APPLICATIONS:**

The deadline date for completed applications is firm. Information missing from incomplete applications may be submitted **by 5:00 p.m. on Monday, November 27, 2006.** Exceptions will be made at the discretion of the Chair.

Past funding does not guarantee future funding.

### FORMAL PRESENTATIONS DURING COMMISSION MEETINGS:

No special audio visual aids may be used during presentations. Any changes in the order of presentations required by a Program Director's schedule are the responsibility of that Program Director. Staff should be notified in advance of any changes.

Presenters should identify themselves by name, title and institution at the podium.

Presentations should be a maximum of 10 minutes, not including question and answer period from the Commission.

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Number of presenters should be limited, preferably to one.

### Presentation may include:

- Brief summary of the application
- Any new information or information not in the application
- Progress report/updates on activity
- How this application or program is different
- Key highlights/accomplishments
- Any challenges/explanation for why Song-Brown goals cannot be met.